



IRAQ AND AFGHANISTAN VETERANS OF AMERICA

U.S. House of Representatives Committee on Veterans' Affairs, Subcommittee on Disability Assistance & Memorial Affairs

IAVA Testimony

Mr. Chairman and members of the House Subcommittee on Disability Assistance & Memorial Affairs, on behalf of the Iraq and Afghanistan Veterans of America (IAVA), thank you for this opportunity to address the issue of "The Impact of OIF/OEF on the VA Claims Process."

My name is SGT Patrick Campbell and I am a combat medic for the DC National guard, an OIF vet and the Legislative Director for the Iraq & Afghanistan Veterans of America. IAVA is the nation's first and largest organization for Veterans of the wars in Iraq and Afghanistan. IAVA believes that the troops and veterans who were on the front lines are uniquely qualified to speak about and educate the public about the realities of war, its implications on the health of our military, and its impact on the strength of our country.

According to the Department of Veterans Affairs I am one of the 54,000 OIF/OEF veterans they are guesstimating will seek care from the VA in 2007. In a briefing with Veteran Service Organizations the Department of Veterans Affairs stated that, "263,000 of their current users" are from the Global War on Terror and they expect an increase of 54,000 in FY 2007.

In general a department's proposed budget is the clearest signal to the outside world of their priorities and their assumptions. Although IAVA sincerely applauds the Department of Veteran's Affairs for removing certain onerous proposals from their FY08 budget proposal and requesting healthy increases, we believe that the VA's assumptions about future usage of the VA system from the soldiers fighting in the Global War on Terror are severely flawed.

The administration's budget projections show a decrease in VA spending over the next three years. One can only assume that the VA is wishing/hoping/expecting the number of veterans demanding services to decrease or maintain their current levels. It is hard to argue with VA's accountants and their actuarial tables because they will cloak their assumptions in mounds of numbers, but when these numbers seem to defy common sense that is when the alarms must go off.

If you remember one thing from this testimony today, remember that the VA has grossly underestimated the demand for their services once again. The soldiers are coming home and they will be asking for care. The question we must be asking ourselves, will be ready for them?

If anything the recent Walter Reed expose has taught us is that trying to treat and care for soldiers and veterans on a limited budget and limited oversight only has one logical conclusion, poor care. In the context of this specific hearing, soldiers are languishing while they wait for their claims to be processed. And woe to the veteran who does not file his/her paperwork correctly and gets denied, because they will be stuck in bureaucratic limbo for years.

We also believe that the VA's current standard for evaluating the speed a veteran gets seen by a medical professional should not be a whopping 45 days or even 30 days. For veterans coming home, especially with mental health issues, a month is like an eternity. The standard should be two weeks or at least broken down into categories.

Soldiers fight for their country, they should not be made to fight against their country.

Many of the other organizations today who are testifying will be providing excellent statistics and solutions. IAVA stands firmly behind their recommendations. Our purpose here today is to convey a single message, that if you start with faulty assumptions you will end with poor results.

This committee must work with Department of Veterans Affairs and the various veterans service organizations to formulate a realistic number of incoming veterans into the VA system over the next five years. Only then will we be able to hire to the correct number claims processors and medical staff to provide the quality of care these veterans deserve.

Respectfully Submitted,

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